APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

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Bayfield Co. Zoning Dept.

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Washburn, WI 54891 (715) 373-6138

Bayfield County Zoning Department P.O. Box 58

Date: Amount Paid: Application No.: Zoning District S S 8 4

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.

Property Owner MARK Volume Legal Description LAND USE Address of Property Is your structure in a Shoreland Zone? Telephone □ * Residence w/deck-porch (# of bedrooms) ☐ * Residence or Principal Structure (# of bedrooms) Fair Market Value \$12,000,00 Use Tax Statement for Legal Description ☐ Residential Other (explain) ☐ Residential Addition / Alteration (explain) ☐ Residential Accessory Building Addition (explain) ☐ Residential Accessory Building (explain) < A+12e ASHLAND * Residence w/attached garage (# of bedrooms) Residence sq. ft. Deck sq. ft Residence sq. ft. 50 FAILURE TO OBTAIN A PERMIT of STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES SANITARY 🔲 0: **2**5 1/4 of 27915 ō 0 Addition. 23 of Deeds 20845 JOHNSON _(Home) (2) (V Block Deck(2) sq. ft Porch sq. ft Garage sq. ft Lutkie Square Footage PRIVY 🔲 Yes 🔲 _1/4 of Section 2 Existing. 160M CONDITIONAL USE Parcel I.D. 87.50 10.00 00 Subdivision 3 200 HD _(Work) _Township Written Authorization Attached: Authorized Agent Contractor ☐ Commercial Accessory Building Addition (explain) ☐ Commercial Principal Building Addition (explain) ☐ Commercial Principal Building ☐ Mobile Home (manufactured date) Basement: Distance from Shoreline: greater than 75' ☐ External Improvements to Accessory Building (explain) ☐ External Improvements to Principal Building (explain) □ Special/Conditional Use (explain) ☐ Commercial Other (explain) Commercial Accessory Building (explain) Type of Septic/Sanitary System Sanitary: たる 248052 SPECIAL USE New ĕ SAME CSM# North, Range Z Existing 4010001000 B.O.A. Yes 🔲 West. Town of Acreage ☐ 75' to 40' ☐ Number of Stories К П Privy (Phone) (Phone) OTHER かんなん less than 40 🔲 0 Ç City 682 4913

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature)

Owner or Authorized Agent (Signature) Muc i 54506

Address to send permit 305 Lutki Ь ZJ Z D Shland

Copy of Tax Statement or (If you recently purchased the property Attach a Copy of Recorded Deed)

APPLICANT -PLEASE COMPLETE REVERSE SIDE

* See Notice on Back

S S (A) Mitigation Plan Required: Inspection Record: Stul Groun Bong Reason for Denial: Condition: 名かる古場 O E CONT. 25.00 Permit Number Destroy. B State Sanitary Number Z * OFFIS Recidior Signed 18 8 Charlotto uar lospecto Ş, Permit Denied (Date) awar Date of Inspection Variance (B.O.A.) # Date 太阳十 **₹** Date of Approval ()A 3-6 SE CAR

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Bayfield County, WI



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